## Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10-749-962

CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			59				ŀ	RATE	FEE	]	RATE	FEE
FC	OR .		NUMBER FILED		NUME	BER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS 1				minus 20= '		* 97		X\$ 9=	873	OR	X\$18=	_
INDEPENDENT CLAIMS 8 minu					*	5		X43=	215	OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT						$\square$		+145=	145	OR	+290=	
* If the difference in column 1 is less than zero, enter					"0" in c	column 2		TOTAL	1618	OR	TOTAL	
CLAIMS AS AMENDED - PART II									· .		OTHER	
	·	(Column 1)	1	(Colun		(Column 3)	1 r	SMALL		OR	SMALL	
AMENDMENT A	,	CLAIMS REMAINING AFTER AMENDMENT	·	HIGHI NUME PREVIO PAID I	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		-		X43=	· · · · · · · · · · · · · · · ·	OR	X86=	
	FIRST PRESE	NTATION OF MU	JUITPLE DEF	ENDEN	CLAIM		1 [	+145=		OR	+290=	-
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colum	nn 2)	(Column 3)	,	NDDII. FEE		• '		
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	EST BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	0. 4.4.4	-	1 [	X43=		OR	X86=	,
	FIRST PRESE	NTATION OF ML	LIPLE DEP	ENDENI	CLAIM	<u> </u>	ı [	+145=		OR	+290=	
						•	L A	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE	
		(Column 1)		(Colum		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	01.4144	<u> </u>		X43=	•	OR	X86=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM		<b>!</b>	+145=		OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If th "High st Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									· .	OR ,	TOTAL DDIT. FEE	
		ber Previously Paid					er foun	nd in the app	ropriate box	in colu	ımn 1.	